

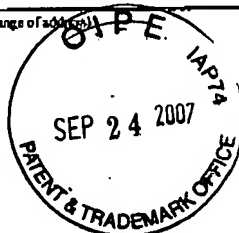
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

9157 1590 09/10/2007
 GENENTECH, INC.
 1 DNA WAY
 SOUTH SAN FRANCISCO, CA 94080



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/052,798	11/02/2001	Camellia W. Adams	09/25/2007, 10/052,798, 00000075 181260	10052798
TITLE OF INVENTION: APO-2 RECEPTOR			01 FC:1501 1400.00 DA	
			02 FC:1504 300.00 DA	

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/10/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
O HARA, EILEEN B	1646	435-069100				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Sidley Austin LLP

2 Diane L. Marschang

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Genentech, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

South San Francisco, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-1260 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Jeffrey P. Kushan

Date 9/24/07

Typed or printed name Jeffrey P. Kushan

Registration No. 43,401

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FAX TRANSMISSION

Total 2 pages, including cover sheet

To: Commissioner of Patents
P.O. Box 1450
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From: Tel. (202) 736-8000

Date: September 24, 2007

Serial No.: 10/052,798

Confirmation No.: 4012

Filed: November 2, 2001

First Inventor: Camellia W. ADAMS

For: APO-2 RECEPTOR

Group Art Unit: 1646

Examiner: Eileen B. O'Hara

Attorney Ref. 22338-00904

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. § 1.8

I CERTIFY THAT THE FOLLOWING DOCUMENTS ARE BEING TRANSMITTED TO THE USPTO AT FAX NUMBER (571) 273-2885 THE DATE SHOWN:

1. Part B – Fee(s) Transmittal form (PTOL-85) (1 page).

SIGNATURE

PRINTED NAME

9-24-07

DATE

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